PTO/SB/22 (10-00) tuse through 10/31/2002. OMB 0651-0031 ce; U.S. DEPARTMENT OF COMMERCE Aless it displays a valid OMB control number.

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PETITION FOR	<b>EXTENSIO</b>	N OF TIME	HNDER 37	CER 1 136(a)

Docket Number (Optional)

	PETITION FOR EXTENSION OF	TIME UNDER 37 C	FR 1.136(a)	003037.86702		,	
	OLD E NE	In re Application of Lynn M. Adams et al				7	
	3	Application Number 09/512,260 Filed February 24, 2000					
	APR O 9 2003	For ENHANCERS OF CFTR CHLORIDE CHANNEL FUNCTION					
	THE THE PARTY OF	Group Art Unit 1647	Examiner R. DeBerry	RE	ECEIV		
	This is a request under the provision response in the above identified ap	·	a) to extend the p		VAK T T	0.	
	The requested extension and appropriate non-small-entity fee are as follows (check time period desired):						
	One month (37 CFF	R 1.17(a)(1))		\$			
· ·	☐ Two months (37 CF	R 1.17(a)(2))		\$_			
	☐ Three months (37 C	FR 1.17(a)(3))		\$ <u>9</u> 2	20.00		
	☐ Four months (37 C	FR 1.17(a)(4))		\$			
	Five months (37 CF	R 1.17(a)(5))		\$			
	above is reduced by one-h  A check in the amount of t  Payment by credit card. For the Commissioner has alm application to a Deposit Act The Commissioner is here or credit any overpayment I have enclosed a duplicated and the papplicant/inventor.	the fee is enclosed.  form PTO-2038 is attacted been authorized becount.  by authorized to charge, to Deposit Account be copy of this sheet.	ched. to charge fees in ge any fees which Number <u>19-0733</u>	may be required,			
	assignee of record of the Statement under 37 (	CFR 3.73(b) is enclose		:B/96)			
			(	50/			
	attorney or agent unde						
	Registration number if a	cting under 37 CFR 1.34(a).	<u> </u>				
	WARNING: Information on this be included on this form. Provi						
	April 9, 2003		Mich	lo July	no.		
	Date		l N	Signature lichelle L. Holmes-	Son		
04/10/2003 YPOLI	T 00000027 190733 09512260			Reg. No. 47,660			
02 FC:2253	465.00 CH		Т	yped or printed na			
	NOTE: Signatures of all the inventors or assigned	es of record of the entire inte	erest or their represen	ative(s) are required. S	Submit multiple		

\*Total of forms are submitted. Burden Hour Statement: This form is estimated to take 0.1 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

forms if more than one signature is required, see below\*.